Bullous herniation of the lung through an intercostal drain site

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Intercostal herniation of pulmonary bulla is very rare. A 75-year-old man with emphysema and previous persistent right-sided pneumothorax (Fig. 1) treated with an apical drain, presented with herniation of a bulla through the apical drain site (Fig. 2). It was confirmed as a bulla by chest radiographs and computed tomography scan (the films of which were lost after operation during transfer to parent hospital). In view of the co-morbidities including emphysema and ischaemic heart disease, the bulla was ligated with a vicryl suture at the neck of the sac under local anaesthesia. There was no air leak, and no form of drainage was used. The patient did well postoperatively.

Fig. 1. Chest radiograph demonstrating a persistent pneumothorax with a bulla in the upper lobe prior to the insertion of the apical chest drain.

Fig. 2. Bullous herniation of the lung through the chest drain site.